06/12/2018 10:38

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. NewDem Future Progress Fund 700 13th Street NW ADDRESS (number and street) Suite 600 (Check if address is changed) Washington 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PLGroup@perkinscoie.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00678698 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Milby, Helen, , , Type or Print Name of Treasurer Milby, Helen,,, [Electronically Filed] 06 12 2018 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	ididate	Committee: This committee is a principal committee (Complete the candidate information below)	
(a)	H	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	<u>Ц</u>	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
Nam Can	ne of didate		
	didate y Affiliatio	Office on Sought: House Senate President	State
ran	y / timetic	Trouse Sonate Trousent	District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	ne of didate		
Par	ty Con	nmittee:	
(d)			Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	П	This committee supports/opposes more than one Federal candidate, and is NOT a separate se	gregated fund or party
()		committee. (i.e., nonconnected committee)	
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	nt Fund	raising Representative:	
(g)	x	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	Stanton for Congress C C006	657304
	2.	Brindisi for Congress FEC ID number C C006	48725
	3.	Kirkpatrick for Congress FEC ID number C C006	51042
	4.	Mikie Sherrill for Congress C C006	40003

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Write or Type Committee N	Name	
NewDem Fut	ure Progress Fund	
6. Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundraising Representat	tive, or Leadership PAC Sponsor
NONE Mailing Address		
Ü	CITY	E ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Repres	
. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the	ne person in possession of committee
Full Name Hilby Mailing Address	, Helen, , , , , , , , , , , , , , , , , , ,	20005
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
3. Treasurer: List the namany designated agent (e	e and address (phone number optional) of the treasurer of the commit .g., assistant treasurer).	ttee; and the name and address of
Full Name Milby, of Treasurer	Helen, , ,	
Mailing Address	700 13th Street NW	
	Suite 600 Washington CITY STATE	20005
Title or Position Treasurer	Telephone number	

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	III I (Reviseu UZ/ZUU9)	rage 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
Banks or Other safety deposit be Name of Bank,	r Depositories: List all banks or other depositories in which the committee deposits funds, hol oxes or maintains funds. Depository, etc.	us accounts, rents
Mailing Address	Amalgamated Bank	
Mailing Address	₁ 1825 K St NW	
Mailing Address	₁ 1825 K St NW	
Mailing Address	1825 K St NW	ZIP CODE
Mailing Address Name of Bank,	1825 K St NW Washington CITY STATE	ZIP CODE
	1825 K St NW Washington CITY STATE	
	1825 K St NW Washington CITY STATE Depository, etc.	
Name of Bank,	1825 K St NW Washington CITY STATE Depository, etc.	
Name of Bank,	1825 K St NW Washington CITY STATE Depository, etc.	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2	for Lines 5(g) or (h), 6,		Page of
Joint Fundraising Angie Craig for New Democrat (McCready for Co Susie Lee for Co	Congress Coalition PAC congress	FEC ID number FEC ID number FEC ID number FEC ID number	C C00575209 C C00409730 C C00641381 C C00655613
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
Mailing Address			
	1		
		1 1 . 1	1
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee J	oint Fundraising Represent	ative Leadership PAC Sponsor
Full Name	by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone Number	
Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in whintains funds.	ich the committee deposi	ts funds, holds accounts, rents
Mailing Address	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Mailing Addiess			
		1 1 1	
	CITY ▲	STATE A	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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1. Friends of Ben	nan for Congress	FEC ID number	C C00637371
2.		FEC ID number	C C00658633
Kohl for Congr	ess 	FEC ID number	C C00647164
4. Focus on the F	uture	FEC ID number	C C00640029
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponso
Mailing Address			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	CITY ▲ d Organization Affiliated Committee Joi fy by name, address (phone number – optional)	STATE ▲ nt Fundraising Represent	ZIP CODE ▲ ative Leadership PAC Spo
Connecte Designated Agent: Identi Full Name	od Organization Affiliated Committee Joi		
Connecte Designated Agent: Identi	od Organization Affiliated Committee Joi		
Connecte Designated Agent: Identi Full Name	od Organization Affiliated Committee Joi		
Designated Agent: Identi Full Name Mailing Address	Affiliated Committee Jointy by name, address (phone number – optional)		
Connecte Designated Agent: Identi Full Name	Affiliated Committee Jointy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Spo

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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·=· · ·	Fundraising Participar	nt:			
Max Ro	ose for Congress		FEC II	number	C C00652248
2. Elissa S	Slotkin for Congres	SS 	FEC II) number	C C00650150
3. Paul Da	avis for Kansas		FEC II	number	C C00653121
4. Lauren	Baer for Congress	S	FEC II	number	C C00652594
6. Name of Any C	connected Organizatio	n, Affiliated Committee, Joint	Fundraising Re _l	presentative	or Leadership PAC Sponsor
Mailing Ad	ldress				
Relationsh	ip:	CITY ▲		STATE A	ZIP CODE A
Г	Connected Organization		Joint Fundraisin		
Pagignated Age	unte Idontify by name of	addraga (phone number contion	۵۱)		
8. Designated Age Full Name	ent: Identify by name, a	address (phone number — option	al)		
		address (phone number — option	al)		
Full Name		address (phone number – option	al)		
Full Name		address (phone number – option	al)		
Full Name Mailing Addr		address (phone number – option		STATE A	ZIP CODE A
Full Name Mailing Addr	ress L				ZIP CODE A
Full Name Mailing Addr TITLE OR I	ressPOSITION ▼	CITY banks or other depositories in v	Telephone N	umber	
Full Name Mailing Addr TITLE OR I	POSITION Depositories: List all	CITY banks or other depositories in vis.	Telephone N	umber	funds, holds accounts, rents
Full Name Mailing Addr TITLE OR I	POSITION ▼ Depositories: List all oxes or maintains funds	CITY banks or other depositories in vis.	Telephone N	umber	funds, holds accounts, rents
Full Name Mailing Addr TITLE OR I	POSITION ▼ Depositories: List all oxes or maintains funds	CITY banks or other depositories in vis.	Telephone N	umber	funds, holds accounts, rents